



# State of New Hampshire 2005 ANNUAL REPORT

The following information shall be given as of January 1  
preceeding the due date Pursuant to RSA 293-A:16.22.

REPORT DUE BY April 1, 2005

ANNUAL REPORTS RECEIVED AFTER THE DUE DATE  
WILL BE ASSESSED A LATE FEE.

Filed

Date Filed: 03/22/2005

Business ID: 291011

William M. Gardner

Secretary of State

GREATSCAPES OF NASHUA, INC.

41 NIGHTINGALE RD

NASHUA, NH 03062

ADDRESS OF PRINCIPAL OFFICE:

41 NIGHTINGALE RD

NASHUA, NH 03062

REGISTERED AGENT AND OFFICE:

J LEONARD SWEENEY III ESQ

6 MANCHESTER ST

NASHUA, NH 03062

ENTITY TYPE: CORPORATION

BUSINESS ID: 291011

STATE OF DOMICILE: NH

FEDERAL ID: 020498440

If changing the mailing or principal office address, please check the appropriate box and fill in the necessary information.

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☐ The new mailing address

☐ The new principal office address

PO Box is acceptable.

## OFFICERS

NAME AND BUSINESS ADDRESS (P.O. BOX ACCEPTABLE).  
(MUST LIST AT LEAST ONE OFFICER BELOW)

NAME Roland Fong  
STREET 41 Nightingale Road  
CITY/STATE/ZIP Nashua, NH 03062  
NAME  
STREET  
CITY/STATE/ZIP  
NAME  
STREET  
CITY/STATE/ZIP  
NAME  
STREET  
CITY/STATE/ZIP

A

## BOARD OF DIRECTORS

NAME AND BUSINESS ADDRESS (P.O. BOX ACCEPTABLE).  
(MUST LIST AT LEAST ONE DIRECTOR BELOW)

NAME Roland Fong  
STREET Same  
CITY/STATE/ZIP  
NAME  
STREET  
CITY/STATE/ZIP  
NAME  
STREET  
CITY/STATE/ZIP  
NAME  
STREET  
CITY/STATE/ZIP

B

NAMES AND ADDRESSES OF ADDITIONAL OFFICERS AND DIRECTORS ARE ATTACHED

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To be signed by an officer, director, or any other person authorized by the board of directors.  
I, the undersigned do hereby Certify that the statements on this report are true to the best of my information, knowledge and belief.

Sign here:

Please print name and title of signer:

NAME

TITLE

FEE DUE: \$100.00

E-MAIL ADDRESS (OPTIONAL):



WHEN THIS FORM IS ACCEPTED BY THE SECRETARY OF STATE, BY LAW IT WILL BECOME A  
PUBLIC DOCUMENT AND ALL INFORMATION PROVIDED IS SUBJECT TO PUBLIC DISCLOSURE

REQUIRED INFORMATION MUST BE COMPLETE OR THE REGISTRATION REPORT WILL BE REJECTED

MAKE CHECK PAYABLE TO SECRETARY OF STATE

RETURN COMPLETED REPORT AND PAYMENT TO:

New Hampshire Department of State, Annual Reports, P.O. Box 9529, Manchester, NH 03108-9529